

**PETITION FOR REVIVAL OF AN APPLICATION FOR PATENT
ABANDONED UNINTENTIONALLY UNDER 37 CFR 1.137(b)**

Docket Number (Optional)
M1015-70070US01

First named inventor: BAMDAD, Cynthia

Application No.: 10/756,802

Art Unit: 1634

Filed: January 13, 2004

Examiner: FORMAN, Betty J

Title: OLIGONUCLEOTIDE IDENTIFIERS

Attention: Office of Petitions
Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
FAX (571) 273-8300

Refund Ref: 02/11/2008 0030050435
Credit Card Refund Total: \$525.00

Am Exp.: XXXXXXXXXXXX1008

NOTE: If information or assistance is needed in completing this form, please contact Petitions Information at (571) 272-3282.

The above-identified application became abandoned for failure to file a timely and proper reply to a notice or action by the United States Patent and Trademark Office. The date of abandonment is the day after the expiration date of the period set for reply in the office notice or action plus an extensions of time actually obtained.

APPLICANT HEREBY PETITIONS FOR REVIVAL OF THIS APPLICATION

NOTE: A grantable petition requires the following items:

- (1) Petition fee;
- (2) Reply and/or issue fee;
- (3) Terminal disclaimer with disclaimer fee - required for all utility and plant applications filed before June 8, 1995; and for all design applications; and
- (4) Statement that the entire delay was unintentional.

1. Petition fee

- ☒ Small entity-fee \$ 770.00 (37 CFR 1.17(m)). Applicant claims small entity status. See 37 CFR 1.27.
- ☐ Other than small entity - fee \$ _____ (37 CFR 1.17(m))

2. Reply and/or fee

- A. The reply and/or fee to the above-noted Office action in the form of Amendment Under 37 C.F.R. § 1.116 and RCE (identify type of reply):

- ☐ has been filed previously on _____
- ☒ is enclosed herewith.

Adjustment date: 02/11/2008 CKHLOK
12/26/2007 INTEFSW 00004955 10756802
02.FC:2253 -525.00 OP

- B. The issue fee and publication fee (if applicable) of \$ _____
- ☐ has been paid previously on _____
- ☐ is enclosed herewith.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.137(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>02/06/08</u>		2 Serial/Patent # <u>10/756,802</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
X	Extension of Time		12/21/07	\$ 525.00						
	Notice of Appeal/Appeal			\$						
	Petition			\$						
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	Assignment			\$						
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			7 TOTAL AMOUNT OF REFUND							
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10 REASON:		8 TO BE REFUNDED BY: credit card								
	Overpayment	Treasury Check								
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X	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
		--								
Can't buy EOT beyond expiration of maximum extendable period for response.										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Shirene Willis Brantley</u>		TITLE: <u>Petitions Attorney</u>								
SIGNATURE: <u><i>Shirene Willis Brantley</i></u>		PHONE: <u>571 272-3230</u>								
OFFICE: <u>Office of Petitions</u>										
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APPROVED: <u><i>CKB</i></u>		DATE: <u>2/11/08</u>								

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